



3rd Quarter—Plan Year 2020

Quarterly Newsletter

January 2020

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[Click here](#) to check out the PEBP calendar for upcoming Board Meetings and other important events.

As we said goodbye to 2019 and the twenty-tens, we also said goodbye to PEBP's Executive Officer, Damon Haycock, who resigned from the position after more than four years of leadership with the agency. As we say hello to 2020 and the new decade, Operations Director Laura Rich steps up as Interim Executive Officer of PEBP. This issue features plan design benefits information to help you get the most from your State benefits now.

Change in PEBP Leadership

On December 20, 2019 the PEBP Board approved the appointment of Laura Rich as the Interim Executive Officer of the Public Employees' Benefits Program. Laura has been with the State of Nevada for almost 11 years and has served as the PEBP Operations Officer since 2015. Previous to that, she worked for the Silver State Health Insurance Exchange, Division of Health Care, Financing and Policy and the Division of Aging and Disability Resources.

Peter Long, appointed by the Governor as the Interim Director of Administration in November 2019, was also appointed as the Chair for the Public Employees' Benefits Program Board. Previously, he served as the Administrator of the Division of Human Resource Management since 2016.

David Smith was also appointed to the PEBP Board in November 2019 after previously serving as a board member from 1999-2007. Mr. Smith has been employed by the State of Nevada since 1995 and has worked in

various positions at the Nevada Parole Board and Department of Corrections. He currently works as a Parole Hearings Examiner II for the Nevada Parole Board.

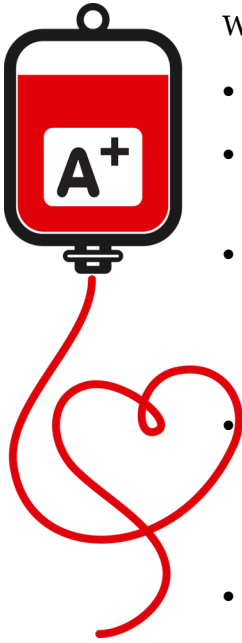
Click [here](#) to get more information on PEBP Board Members.



Happy New Year! Medicare open enrollment changes go into effect on January 1st.

A c c e s s . Q u a l i t y . A f f o r d a b i l i t y .

January is National Blood Donor Month— Everyone



Why Your Donation Matters:

- One donation can save up to three lives
- More than 38,000 blood donations are needed every day
- More than 1 million people every year are diagnosed with cancer for the first time and many of them will need blood during chemotherapy
- Type O-negative blood can be transfused to people with any blood type, but this blood type is rare, and supplies of it are low
- While 38% of the American population is eligible to give blood, only 2% actually donates

Having trouble accessing your E-PEBP Portal?

Try using **Internet Explorer** or **Safari** instead of Chrome or Firefox. The E-PEBP Portal is better supported in these browsers.

Pet protection plans are available to purchase any time.

Log into your [E-PEBP Portal](#) to learn more!



Diabetes Care Management Program— CDHP



The Diabetes Care Management (DCM) program is a disease management program that provides enhanced benefits to participants diagnosed with diabetes that are enrolled in and actively engaged in the DCM Program. [Click here](#) to learn more about these enhanced benefits.

Benefit Description	In–Network	
Office Visits	Two visits covered at 100% per PY (no Deductible)	
Laboratory Test	Two routine lab tests covered at 100% per PY (no Deductible) at free-standing laboratory	
<u>Diabetic Supplies</u> (insulin and Metformin)	<u>Initial 30-Day Supply</u>	<u>Mail Order 90-Day Supply</u>
Tier 1 Generic	\$5 Copay	\$15 Copay
Tier 2 Preferred Brand	\$25 Copay	\$75 Copay



Where is the best place to get my lab work done?

Laboratory outpatient services at a free standing, In-Network facility such as Lab Corp or Quest are subject to the Deductible and/or Co-Insurance/Co-Payment. Hospital based lab services except for pre-admission testing, urgent care, and emergency room lab services are not normally covered.

What is the Life Services Toolkit?

This toolkit provides eligible participants with online access to: estate planning assistance, financial planning, health and wellness, identity theft protection, and funeral arrangements.

To learn more about support tools available and beneficiary services, please see the [Life Services Toolkit Flyer](#).



Listen Up— Your Hearing Care is Covered— CDHP & EPO

PEBP has teamed up with Amplifon Hearing Health Care to provide you with quality hearing care at a [convenient location](#) near you. With the Amplifon program, you have access to:

- **Custom hearing solutions** – with an **average savings of 62% off retail** on a wide choice of products from the industry's leading brands**
- **Risk-free 60-day trial** – 100% money back guarantee – no return or restocking fees
- **Aftercare program** – 1-year free follow-up care and 3-year warranty covering loss and damage*
- **Free batteries** – Receive a two-year complimentary supply, a maximum 160 cells per

hearing aid, an approximately \$150 value

- **Financing** – no interest for those who qualify

Consumer Driven Health Plan (CDHP) members: This is in addition to your \$1,500 per ear hearing aid benefit available to you every three years once your annual deductible has been met.

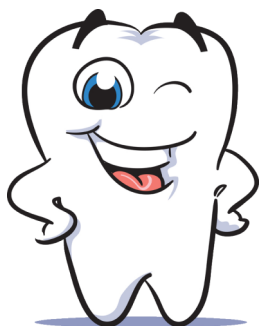
Premier EPO Plan members: \$25 copay per device, maximum benefit \$1,500 per device per ear every three years.

Call 877-371-4073 to get started or [click here](#) to find out more.

**Medically necessary hearing aids covered with a 50% hearing loss in one ear.

*Warranty - Some exclusions apply. Limited to one-time claim for loss and damage. Deductibles may apply.

Dental Benefits— Everyone



Find In-Network Providers on the PEBP Website by [clicking here](#).

Plan Year Maximum Benefit**	\$1,500
Plan Year Deductible (applies to basic and major services only)	\$100 per person or \$300 per family (3 or more)
Preventive Services* Teeth cleaning (4/plan year) Oral examination (2/plan year) Bitewing X-rays (2/plan year)	<ul style="list-style-type: none"> •Covered 100% •Not subject to deductible •Does not apply towards plan year max benefit
Basic Services* Full-mouth periodontal cleanings, fillings, extractions, root canals, full-mouth X-rays	You pay 20% coinsurance after deductible is met
Major Services* Bridges, crowns dentures, tooth implants	You pay 50% coinsurance after deductible is met

**** Benefit applies to In-Network Providers**

Medicare Eligibility— Retirees

As a retiree or a covered dependent of a retiree who is aging into Medicare, you will have new options for your medical, dental, prescription drug, and vision coverage. When you are retired and become eligible for premium-free Medicare Part A you will need to enroll in Part A and purchase Medicare Part B coverage and, in most cases, you must transition into a medical plan offered through the Medicare Exchange, Via Benefits (formerly Towers Watson's OneExchange).

Eligible retirees enrolled in a medical plan through Via Benefits may qualify for a monthly contribution to a Via Benefits Health Arrangement (HRA) account. The contribution is based on the retiree's years of service

(beginning with 5 years up to a maximum of 20 years). If you are eligible for the HRA allocation, your first Via Benefits HRA contribution will begin when your medical plan becomes effective through Via Benefits.

Please note: Active employees and eligible dependents are not required to enroll in Medicare until retirement.

[Click here](#) to learn more about retiring before and after age 65

Tax Season is Coming—Everyone

In the next few months, you may be receiving different tax documents in the mail. Here is a quick guide explaining the purpose of some of those documents and who will be sending them to you. This is not an all inclusive list and if you have any further questions, please contact your tax consultant or a tax advisor.

Document	Sent By	Purpose
W2	Your employer	Reports income paid and taxes withheld
1099-SA	HealthSCOPE	Reports distributions from your HSA account for CDHP members
1095-B*	<ul style="list-style-type: none"> • PEBP to CDHP and EPO Retirees/COBRA • HPN to HMO Retirees/COBRA 	Proof of health insurance coverage for members and dependent(s) on your plan
1095-C*	<ul style="list-style-type: none"> • PEBP to Active CDHP and EPO Employees • HPN to Active HMO Employees 	Proof of health insurance coverage for members and dependent(s) on your plan

*These forms are **not required** to file your taxes. They should be kept for your records. The IRS has granted an extension for Form 1095-B and 1095-C for this tax year, these forms are not required to be mailed out to you until March 2, 2020.

HRA On-Site Assistance in Carson City, Reno and Las Vegas—Retirees

MARK YOUR CALENDAR!

PEBP's Medicare retirees who are already enrolled at Via Benefits have the opportunity to meet with an HRA Specialist in Carson City, Reno or Las Vegas during January, February and March of 2020.

The Via Benefits representative will be available to assist with such things as how to complete claim forms, how to enroll in auto-reimbursement, how to request reimbursement and the supporting documents that are needed, etc.

In order to see an HRA specialist an appointment is necessary. Please call 1-844-266-1395.

[Click here](#) to view the flyer with the HRA specialist's locations.



January 2020

Las Vegas Monday, 1/13 from 9am– 3pm
Tuesday, 1/14 from 9am– 3pm

Reno Wednesday, 1/22 from 9am– 4pm
Thursday, 1/23 from 9am– 4pm

February 2020

Las Vegas Monday, 2/10 from 9am– 3pm
Tuesday, 2/11 from 9am– 3pm

Reno Wednesday, 2/19 from 9am– 4pm

March 2020

Las Vegas Monday, 3/9 from 9am– 3pm
Tuesday, 3/10 from 9am– 3pm

Reno Wednesday, 3/18 from 9am– 4pm
Thursday, 3/19 from 9am– 4pm

Available dates and times for **Carson City** vary, so please call 1-844-266-1395 to check availability and to schedule an appointment.

A c c e s s . Q u a l i t y . A f f o r d a b i l i t y .